

STATE OF SOUTH CAROLINA

(Caption of Case)

Example: Application for a Class C Charter Certificate from
John Doe dba Doe's Limo

REQUEST TO CANCEL CLASS
"C" CERTIFICATE FOR
CHARLES TOWNE BOUND LIMOUSINE
SERVICE LLC.

BEFORE THE
PUBLIC SERVICE COMMISSION
OF SOUTH CAROLINA

TRANSPORTATION COVER SHEET

DOCKET

NUMBER: 2011 - 438 - T

If this is your first time filing an application with the PSC, you will not have a Docket Number. The Commission will assign one to you. If you have filed with the Commission before, a Docket Number was assigned and should be entered above.

Please type or print)

Submitted by: MICHAEL MILEWSKI

Telephone: (774) 994 0227

Address: 148 VILLAGE LN

Fax: (508) 487 3897

WELLFLEET MA 02667

Other:

Email:

CHARLESTOWNEBOUND@GMAIL.COM

NOTE: The cover sheet and information contained herein neither replaces nor supplements the filing and service of pleadings or other papers required by law. This form is required for use by the Public Service Commission of South Carolina for the purpose of docketing and must be filled out completely.

NATURE OF ACTION (Check all that apply)

☐ Application - Class C Taxi☐ Application - Class C Charter☐ Application - Class C Charter Bus☐ Application - Class C Non-Emergency☐ Application - Class E Household Goods☐ Application - Class E Hazardous Waste☐ Application☐ Request for Extension to Comply with Order☐ Request for Order Granting Authority to Obtain Certificate of Public Convenience and Necessity to Be Rescinded☐ Request for Cancellation of Certificate☐ Request for Suspension☐ Request for Reinstatement☐ Request for Name Change on Certificate☐ Request to Amend Scope of Authority☐ Request to Amend Tariff (rate increase, etc.)☐ Request to Amend Passenger Limit☐ Request☐ Exhibit☐ Late-Filed Exhibit☐ Letter☐ Proposed Order☐ Publisher's Affidavit☐ Reservation Letter☐ Response☐ Return to Petition☐ Other:

If you have any questions about this form, please contact the PUBLIC SERVICE COMMISSION at 803-896-5100.

Request for Cancellation of Certificate

File the original with:

Public Service Commission of South Carolina
 Clerk's Office
 Motor Carrier Matters
 P.O. Box 11649
 Columbia, S.C. 29211
 (803) 896 - 5100
 FAX (803) 896-5199

Mail or fax a copy to:

S.C. Office of Regulatory Staff
 Transportation Department
 1401 Main Street, Suite 900
 Columbia, S.C. 29201
 (803) 737-0578
 FAX (803) 737-0815

DATE: 9/22/14

Please consider this a request to cancel my:

- ☐ Class C Taxi Certificate
- ☒ Class C Charter Certificate
- ☐ Class C Charter Bus Certificate
- ☐ Non-Emergency Certificate
- ☐ Class E Household Goods Certificate
- ☐ Class E Hazardous Wastes Certificate

☐ Class A Restricted Certificate

My Certificate Number is _____

CHARLES TOWN BOUND LIMOUSINE SERV. DBA
 (Name of Company) LLC.

(If applicable)

148 VILLAGE LN
 (Street Address)

(Mailing Address if different from Street Address)

NEWFREET MA 02667
 (City, State, Zip Code)

(City, State, Zip Code)

(774) 494 0227
 (Telephone Number)

(843) 608 0567

(Signature)

MICHAEL MILEWSKI (OWNER)
 (Title) Owner, President, etc.